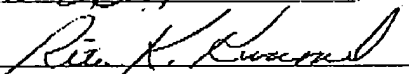
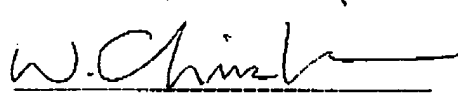


PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) K35A0878							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Assistant Commissioner for Patents, Washington D.C. 20231" on <u>1-30-2004</u> . Signature: <u></u> Typed or printed name: <u>Rita K. Kimmel</u>		In re Application of GUSTAFSON ET AL. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Application Number 09/846,078</td> <td style="padding: 2px;">Filed 04/30/2001</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For SPINDLE MOTOR HAVING SPINDLE MOTOR STATOR WITH LAMINATE LAYERS FOR INCREASED HEAD STACK ASSEMBLY ACCESS</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit 2834</td> <td style="padding: 2px;">Examiner ADDISON, KAREN B.</td> </tr> </table>		Application Number 09/846,078	Filed 04/30/2001	For SPINDLE MOTOR HAVING SPINDLE MOTOR STATOR WITH LAMINATE LAYERS FOR INCREASED HEAD STACK ASSEMBLY ACCESS		Group Art Unit 2834	Examiner ADDISON, KAREN B.
Application Number 09/846,078	Filed 04/30/2001								
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Group Art Unit 2834	Examiner ADDISON, KAREN B.								
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.									
The fee for this Notice of Appeal is (37 CFR 1.17(b))		\$ <u>330.00</u>							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____							
<input type="checkbox"/> A check in the amount of the fee is enclosed.									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.									
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.									
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>23-1209</u> . I have enclosed a duplicate copy of this sheet.									
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the		<u></u> Signature							
<input type="checkbox"/> applicant/inventor.		W. Chris Kim, Reg. No. 40,457 Typed or printed name							
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>1/30/04</u> Date							
<input checked="" type="checkbox"/> attorney or agent of record.									
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): _____									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
<input type="checkbox"/> Total of <u>1</u> forms are submitted.									

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